



PURCHASE ORDER

PO Number: 303-1-0435

Requisition Number: 303-1-00965

Order Date: 1/28/2021

Released

**DUE TO COVID-19 AND TFC'S COMMITMENT TO TIMELY PAYMENT,
PLEASE SUBMIT INVOICE ELECTRONICALLY TO:**

accountspayable@tfc.state.tx.us

IF INVOICE IS MAILED, DELAYS MAY OCCUR.

TEXAS FACILITIES COMMISSION

FISCAL MANAGEMENT / ACCOUNTS PAYABLE

P.O. BOX 13047 Austin, Texas 78711-3047

Delivery Location

Parking Garage R, Warehouse
1706 San Jacinto Blvd.
Austin, TX 78701

Show numbers on all papers and packages

Referenced Source or Vendor

1741976051100
WorkQuest
1011 EAST 53 1/2 STREET
Austin, TX 78751
Robert Olivo
Phone: 512-694-0756, Fax:
robertolivo@workquesttx.com

Antibacterial foam hand soap

TSB Contract No. 485-A1

Description TSB PO No. 21053593

TFC Contact:

Rick Sosa, (512) 463-5773

Line Items

Description	Qty	Unit	Unit Price	Start Date	End Date	Total
GOJO FMX Antibacterial foam hand soap Scent: Orange Blossom Commodity Code: 48586551607						
NIGP Class: 485 NIGP Item: 86 Object Class: 300 Reimbursement Type: HB3042 Notes: Hand soap purchase is for the safety of the tenant staff and visitors.	20	Case	\$55.90	1/28/2021	4/30/2021	\$1,118.00

Grand Total \$1,118.00

Questions or concerns regarding this transaction or service should be directed to: Texas Facilities Commission Procurement Division, Phone: (512)463-0209 or FAX: (512)236-6164 (The mailing address for the Texas Facilities Commission is at the top of this purchase order.)

Agency	TFC
Fiscal Year	2021
Division	Facilities Management and Operations
Program	Property Services
Phone	5124635773
Org Code	0415 - Custodial HB3042 - PO Activity
Type of Purchase/PCC Code	'A' Purchases as Automated Term Contracts using TxSmartBuy
Work Order Number	750747

ALL TERMS AND CONDITIONS SET FORTH IN OUR BID INVITATION BECOME A PART OF THIS ORDER. VENDOR GUARANTEES MERCHANDISE WILL MEET OR EXCEED SPECIFICATIONS IN THE BID INVITATION.

Invoicing Standards

To facilitate payments from Texas Facilities Commission please follow the invoicing standards set forth below.

The invoice should include, but is not limited to including:

- (1) the vendor's mailing and e-mail (if applicable) address;
- (2) the vendor's telephone number;
- (3) the name and telephone number of a person designated by the vendor to answer questions regarding the invoice;
- (4) the state agency requisition number;
- (5) the state agency's name, agency number, and delivery address;
- (6) the commission's purchase order number, if applicable;
- (7) the contract number or other reference number if applicable;
- (8) a valid Texas Identification Number (TIN) issued by the Comptroller of Public Accounts;
- (9) a description of the goods or services, in sufficient detail to identify the order which relates to the invoice;
- (10) unit numbers corresponding to the original order; and
- (11) other relevant information supporting and explaining the payment requested or identifying a successor organization to an original vendor, if necessary.

FOB DESTINATION CASH DISCOUNT: 0% 0 DAYS.

TEXAS FACILITIES COMMISSION INTERNAL PURCHASING

PURCHASER: _____

Sastry, Archana - CTCM, CTPM, 5124632743

(IN ACCORDANCE WITH YOUR BID, SUPPLIES MUST BE PLACED IN THE AGENCY RECEIVING ROOM IN DAYS FROM RECEIPT OF ORDER.)

STATE AND CITY SALES TAX EXEMPTION CERTIFICATE: The undersigned claims an exemption from taxes under Tex. Tax Code § 151.309 (1993), for purchase of tangible property described in this purchase order, purchased from contractor and/or shipper listed above, as this property is being secured for the exclusive use of the State of Texas.

[\(Show Terms And Conditions...\)](#)